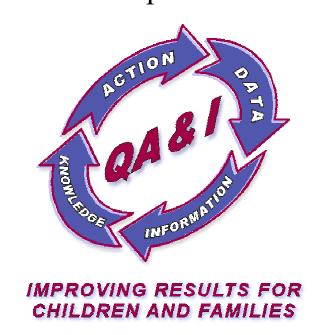
Iowa Department of Human Services



Quality Assurance and Improvement Annual Report for 2008





Introduction and Background

This report provides an overview of the Quality Assurance and Improvement system, and activities for SFY 2008 for the Department of Human Services, and reflects the continued commitment of DHS to continuously review and improve client outcomes and agency efficiency and accuracy.

The Department initially developed a defined Quality Assurance and Improvement (QA&I) system in 2004 based on recommendations made during the federal Child and Family Service Review and as an element of the Department's Child Welfare Redesign efforts, called "Better Results for Kids". The QA&I system was an expansion and reorganization of a wide range of pre-existing quality assurance related "activities" that have been conducted for years. These individual events and activities were effective in addressing targeted issues, such as a case review for child safety compliance or data review, and now have been combined together as part of an overall agency initiative, they allow DHS to look at results across the agency and to impact systems and the working DHS culture.

These activities of the past are the foundation which the new QA&I system is built, and which has been expanded into a comprehensive model standardized across Child Welfare, and in the past year to include Assistance Programs, with future expansion to other areas. This undertaking "embeds" quality assurance into the work that is done today, integrates quality assurance with the Department's Redesign efforts, and provides the ability to 1) identify and 2) respond to opportunities for improvement. The Department envisions Quality Assurance and Improvement as more than the simple application of technical methods. Quality Assurance and Improvement requires behavior change – it requires learning to think and work differently, and many efforts will focus on strategies which involve ongoing coaching, mentoring and supervision, and which will look for focused opportunities for improvement.

QA&I Structure

The structures and resources to support quality improvement within the Department's QA system is comprised of the following:

- QA Coordinator and Quality Assurance Management Analyst in each Service Area of the Department.
- Local QA&I Committee in each Service Area consisting of representatives of the service area, consisting of front line staff, Supervisors, Administrators, Community Liaisons, and Managers.
- Bureau of Quality Assurance in the Division of Results Based Accountability

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Statewide QA&I review functions are performed by the Bureau of Quality Assurance & Improvement in partnership with the strategic planning of the Department coordinated through Managers, Administrators, and QA&I staff resources. These structures bring aligned focus to monitoring and analysis of the performance of the state in delivering the services and benefits provided, and strategic choices to which efforts to focus improvement efforts upon. Quality Assurance and Improvement work is about improvement of outcomes and process or "system" improvement, both at the state and at the service area level.

Goals of Quality Assurance & Improvement- the overall goals of QA&I

- To provide a permanent structure for independent, objective evaluations of the quality of services and outcomes for children and families.
- ➤ To increase the capacity of the Department to 1) assess and 2) improve delivery of services and benefits.
- ➤ To reduce the variation of outcomes for children and families served by the Department.
- To provide the DHS staff and managers with information and supports of sufficient quality to evaluate and manage the Department's service delivery system, with the ongoing goal of continuous improvement.

Attributes of Quality Improvement

- Quality Improvement serves to develop and maintain a culture of excellence.
- Quality Improvement <u>develops skills</u> of all staff to recognize both quality, and opportunities for improvement.
- Quality Improvement encourages staff to <u>seek new experiences</u> beyond normal duties and outside normal work areas, so they might consider additional ways of improvement they may not have previously experienced.
- Quality Improvement demonstrates that all staff have the ability to <u>influence</u> quality of the work they do directly, and also through others they work with.

The QA&I system is not a separate or stand alone effort, but rather envisioned to be an integrated part of all the work that is done. The role of QA&I is to support the organizational development of the department as a learning organization. QA&I strives to improve outcomes for those who receive services or benefits, to improve efficiency and ease of delivering those services for agency staff, and reduce the variation of both outcomes and efficiency, improving the predictability of high quality services.

With the above in mind, DHS established a clear and accepted QA&I Mission.

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Mission

The mission of the Iowa Department of Human Services Quality Assurance & Improvement (QA&I) efforts are to help ensure that DHS services are delivered in a quality, appropriate, safe, respectful, and cost-effective manner that are focused on achieving positive results for the children, adults, and families served.

For DHS to be successful in the design, development and delivery of services, quality assurance must be a part of all that we do, with a specific focus on the individual case, front line staff and supervisory levels. Improving individual case results and supporting staff with adequate data, tools, models of practice, systems, and policies to make informed decisions will improve system-wide results.

Result-Based Leadership Agendas and Planning

To assist the Department in thinking, working and planning differently, tools and coaching are provided to develop Leadership Agendas, result-based strategic plans, and organizational assessments, which in turn will lead to development of performance monitoring criteria, and which may involve quality improvement strategies. QA&I is also taking a significant role in helping DHS to benefit from LEAN/Kaizen strategies to quickly identify and implement improvements to vexing problems that keep managers/staff up at night.

QA & I provides dynamic and effective facilitation and related decision-making methods and supports to collaborative endeavors such as the IM Business Partners and the Services Business Team, work groups, and/or self-directed work groups and teams.

Highlights of QA&I Activities by Program Area

CHILD WELFARE

During SFY08, Quality Assurance and Improvement continued to gain broader acceptance and application throughout the Department. Analysis of data has become an integral part of the Department's evaluation of performance. Monthly reports are

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generated for key performance areas. When analyzing performance and trends, Service Areas review additional information to understand issues that may impact key performance areas. The concept of QA&I has moved beyond the core group of QA Coordinators, and started to gain momentum as a standard part of practice. From Service Area Managers to front line staff in the service areas, discussion of data and what it means about practice is a routine event, as well as how to put that information to use in action based improvement strategies are becoming more routine.

Although increased data has provided some important information regarding practice performance, it has also created a barrier. Communicating with data is very concrete and, over the last year, the increased emphasis on data has resulted in the message being more about "did we meet targets?" rather than evaluating the practice behind the numbers from a quality improvement perspective. Rather than using the data as one of many pieces of information that informs practice and improvement strategies, it has at times been perceived as the goal itself, a "pass" or "fail" evaluation. The spirit of quality improvement – always striving to do better – is important to be communicated as the goal throughout all levels of DHS and to base change strategies on that philosophy. In addition, a gap continues to exist between data that is routinely reported retrospectively and data that could be provided to the field prospectively that would assist them in planning and managing their time effectively, resulting in improved performance. These supports have been requested but will require developing new skills in monitoring and adjusting to benefit from this information once it becomes available.

The eight (8) QA&I Coordinators focusing on Child Welfare continued to meet monthly and share information on local service area strategies throughout the fiscal year; in addition, they have established among themselves a network, which can be drawn upon as a resource as needed. Individual service areas are learning from each other and using the rich combined resource of the QA Coordinators to inform practice decisions. From a statewide perspective, this group completed an analysis of newly identified focus areas and identified a potential statewide strategy that could impact multiple focus areas. A proposal has been written and submitted to the CFSR Operations Team for review, as it focuses on efforts to locate and engage the non-custodial parent; engagement of the non-custodial parent has been shown to improve outcomes for children in child welfare and is also central to best practice expectations set forth by ACF. This is just one example of how the QA&I team works together to identify trends, barriers, and solutions.

The Child and Family Service Review standards have been a primary focus over the last state fiscal year, and will continue as such. The on-site review has been re-scheduled for 2010 and this provides additional time to identify barriers and implement change strategies to improve outcomes for children and families. The CFSR standards are based on best practice and the target performance expectations provide guidelines for where our practice should be. We continued to work toward alignment between the State case reading tool and the Federal case reading tool; recently, the Department became aware that the Federal case reading tool will be made available to the states and plan on

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implementing the Federal case reading tool in its entirety. This will assist reviewers and workers in becoming more familiar with the Federal standards.

Through the CFSR Operations Team, "mini" CFSR reviews have been completed in counties in the Des Moines and Ames Service Areas; additional reviews in the other six service areas are scheduled and expectation is that these reviews become on-going activities. Service areas are paired and peers from the partner service area complete the review; this cross-service area review will broaden the supervisor's experience and may lead to promising practices being spread throughout the state. The reviews attempt to replicate the Federal review through sampling methodology, focus group meetings, and interviews with those people connected to the cases reviewed; the primary difference in the reviews is that currently, only four case reviews are being completed in each county. The focus is more on the process of the review and supporting information gathered in the focus groups through the case reviews. Of significant benefit is the experience that QA Coordinators, Supervisors, Field Staff, and Administrators are gaining by serving as reviewers, site coordinators, co-leads, and interviewees during this learning and sharing process.

Requests for surveys of various target groups have continued to be plentiful during this state fiscal year. Currently, on-going satisfaction surveys are being conducted with the support of RBA for current foster parents; exiting foster parents; families receiving Safety Plan or Family Safety, Risk, Permanency services; Community Care participants; and the DHS workers who interact with these services. The survey results are tied to performance-based contracts. In addition to the surveys already noted, the Cedar Rapids Service Area requested assistance in implementing a survey for foster parents specific to issues of concern noted by stakeholders; the results of this survey were used to follow up and address the concerns. Human Resources is currently preparing to distribute a DHS Worker satisfaction survey that is required on an annual basis; RBA facilitated the development of the survey and will provide the support to compile the data and generate reports for analysis of trends.

PROMISE JOBS

Quality Assurance and Improvement for Promoting Independence and Self-Sufficiency through Employment Job Opportunities and Basic Skills (PROMISE JOB) posts monthly reports on the DHS website.

http://www.dhs.state.ia.us/Partners/Reports/PeriodicReports/PromiseJobs/PJFFY2008.html

There are two reports posted on the web site. 1) Provides information on the number of components or activities a participant is in engaged in for the month of report. 2) Provides information on targeted elements that DHS monitors over the contract year.



PROMISE JOBS Case reviews

Since the approval of Iowa's Work Verification Plan (WVP) submitted in September 2007, QA & I has been developing a review tool for PROMISE JOBS. Within the WVP the Internal Controls section was included to detail how Iowa will confirm and verify that PROMISE JOBS activities are consistently counted as described within the plan. A new web based case review tool, called PROMISE JOBS Case Review Tool (PJCRT), was developed and implemented in April 2008. This tool aligns performance monitoring with state and federal guidelines.

PROMISE JOBS 1st level case reviews began April 1, 2008. QA & I is in their 4th month of collecting results for the reviews. A random sample is determined by PJCRT based on worker, supervisor and status of the case for the month of review. The reviews are read retrospectively meaning they are reviewing the activities from three months ago once the sample is selected. The reason for the lag time is due to process of reporting hours of activities. The worker receives time and attendance or hours the month after a person participates in an activity. The worker then has until the 20th to make entries in the IWorks system. Employment hours are unique because the worker actually has two months to enter the hours, meaning they have until the 20th of the 2nd month and the hours will be counted and recorded. DHS allows a 2 month time frame only for the employment records to gain maximum hours in that activity.

QA & I and DHS policy staff worked with PROMISE JOBS to begin introducing the new review process by rolling out a paper version of the case review tool in January 2008. PROMISE JOBS reviewers and administrators were trained via conference call. This allowed the reviewers to become familiar with the new federal requirements outlined in the WVP. Many questions about content and requirements were addressed in the 4 months between the two versions and made implementation of the web based tool very smooth.

QA & I will be developing a second level review plan in the upcoming year to create focus for program improvement. The first step in this process is to analyze the data that has been collected in the initial months from the finished case reviews. Then we can begin to see what's working well and what's not, in order to identify areas of focus that need improvement. Once this has been established we will prioritize what needs be done first, strategize, monitor, review and make any appropriate adjustments. Based on the above results we can develop criteria of targeted 2nd level reviews.

PROMISE JOBS Disability Specialists

QA & I has been colleting and sharing Work Participation data with PROMISE JOBS Disability Specialist since February 2007. At first the caseloads were unstable and criteria was still being developed on who would be referred to the specialists. DHS policy staff and PROMISE JOBS decided to wait to determine measures and outcomes until the caseloads stabilized or until we had at least six months worth of data to review. The group needs to reunite to review the baseline information collected set standards and

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measures for this population. Once the measures have been established the data collected will be used to determine areas in need of improvement.

The two surveys for the specialist and clients are still in the process of development. They were put on hold to implement PJCRT. The information will be collected from clients, IVRS and PROMISE JOBS. The purpose is to review the collaborative efforts in helping a person with disability overcome barriers and become employed. The survey is expected to be implemented by October 2008.

FaDSS

The FaDSS program provides in-home case management to families who are at risk of long-term dependency on the Family Investment Program (FIP). FaDSS offers FIP families with significant or multiple barriers supportive services designed to help them reach economic self-sufficiency.

Until state fiscal year 2007, the Department of Human Services contracted with the Department of Human Rights (DHR), Division of Community Action Agencies (DCAA) to administer the FaDSS grants program. In July 2007, DHR became solely **responsible** for the administration of the FaDSS program. The Department of Human Services continues to report on results for FIP families receiving FaDSS services on the DHS website.

http://www.dhs.state.ia.us/Partners/Reports/PeriodicReports/FaDSS/FFY%20FaDSS2008.html

Focus Areas

DHS and PROMISE JOBS decided to focus on the three highest populated service delivery regions (SDR) that serve participants and review best practices. (Cedar Rapids, Davenport and Des Moines). Monthly conference calls have taken place with representatives from all three areas, PROMISE JOBS administrative staff, DHS policy and QA&I since October of 2008. The calls focus on what is working well in those areas and is shared during the call.

January through April of 2008, DHS provided data for the three areas to review cases of why they were not meeting work participation and focusing on those with zero hours that were required to meet 20 hours. In these three areas 60% of the participants are required to meet 20 hours of work participation. Of that 60%, more than 70% have zero hours of participation.

Of those reviewed the top 5 reasons for not engaging or meeting WPR:

- 28% In the process of implementing an LBP
- 14% Disabled and coded as short term, long term or disabled family member
- 12% Lapse in case management
- 10% Attempting to engage but no clear written reminder had been sent

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The majority of participants having zero hours or not meeting WPR, as suspected, is due to the LBP process and the time it takes to implement. PROMISE JOBS and DHS policy staff will be reviewing this process based on the information.

The conference calls will continue to take place in the next fiscal year to focus on what is working and what's not. We will continue to focus on these three areas with emphasis on those required to meet 20 hours and have zero hours and increase participation in the Work Experience Program.

Following the lead of DHS, Iowa Work Force Development is in the process of developing internal QA & I staff to focus on quality improvement process for these areas and across the state.

Food Assistance

The QA&I model has become an established part of the Payment Accuracy Management Team (PAMT), which represents all service areas. This year, QA&I staff continued to provide data for both active and negative Quality Control (QC) Error rates, claims establishment, QC timeliness of application processing and participation. Staff also provided ongoing information and clarification regarding when the data becomes final, and what is used to calculate the data for USDA. QA&I staff were also asked to analyze QC errors, monitor trends and research ways to improve accuracy and identify lessons learned from other states. The new positions for IM QA and I for each service area were included in these discussions.

QA&I staff identified new trends emerging in both the negative and active data. These trends were brought to the attention of PAMT. Those identified trends included an overall increase in payment errors. While the errors in Wages and Salaries decreased, it continued to represent the largest part of our total errors. QA&I staff specifically followed up on the wages and salaries error trend by providing service areas with detailed summaries of their specific errors in this element as well as other elements. Based on available error data, QA&I staff provided guidance, which lead to a decision to schedule and hold a Kaizen Event, focused on Food Assistance errors Wages and Salaries errors. This event included the widest representation of staff from Administrators to front line staff, so that all perspectives could be taken into account to identify opportunities and design solutions in partnership.

In addition, QA&I staff were asked to participate in a new QC error review process to document the results of each case reviewed. Any information learned in that review process can then be shared during PAMT. QA&I also identified an issue during the ME process with an invalid negative action for a case cancelled due to an incomplete FAIR. The FAIR has a question that requires a yes/no answer from the client for an item not needed for the FAIR to be complete. FA Policy staff agreed to revise the form so that a



yes/no answer is not required which should reduce the possibility of the case being cancelled for this reason.

QA&I staff conducted Food Assistance Management Evaluation reviews as required by federal regulations to monitor the priority areas set by USDA. QA&I staff completed reviews in six counties for this fiscal year. Case reviews were conducted on about. forty-five cases in each review county. Grassroots contacts were made with organizations in each review county. ME contacts 30 clients by phone and interviews them regarding their experience with the county office. An in-person meeting was conducted with each review county staff and service area management staff to learn about their processes. QA&I brought information from these reviews back to PAMT. They shared both best practices and any identified error trends found during these reviews.

The Food and Nutrition Service (FNS) conducted a State Agency Operations Review (SAOR) and on-site visit in March 2008. QA&I staff were an integral part of this site visit.

Participation in the Food Assistance Program continues to increase in Iowa and we have met the Director's goal of 64% for the year.



Summary

Quality Assurance & Improvement activities have already made positive contributions in several areas, even though the tools and processes are still new, QA&I staff are becoming more efficient and effective with time and experience. Clarity and consistency of expectations (Defining Quality) remains the lynch pin of QA&I activities. Only after clarifying expectations can systems, processes and results be assessed for alignment and measurement of performance and results. With clarity of focus and consistent understanding of performance, then and only then begins the most important work of QA&I, development of effective strategic improvement plans and focus on continuing improvement. Another cultural change for agency staff will be in dealing with uncovering opportunities for improvement, and to understand those opportunities not as identification of past individual shortcomings in any way, but recognition of what can be done differently today to improve results and efficiencies. People are not accustomed to identifying and sharing what's not work for them, and learning that it's safe and important to do so in order to find opportunities to improve will require on-going effort and support from leadership. It is important to note that the role of QA&I is to focus on systemic improvement at state and local levels, and it is not about performance of individuals.

Over the next year, QA&I will continue to be built into all the work of DHS staff, meaning that QA&I is not a sporadic look back performed by a few individuals resulting in a report, but rather builds and supports a new and interactive way of doing the business for all staff of DHS, and which requires a behavior change. QA&I requires learning to think and work differently, always thinking about what we're trying to accomplish, evaluating how we're doing, and continually selecting and implementing focused time limited improvement strategies to improve our processes and customer results.